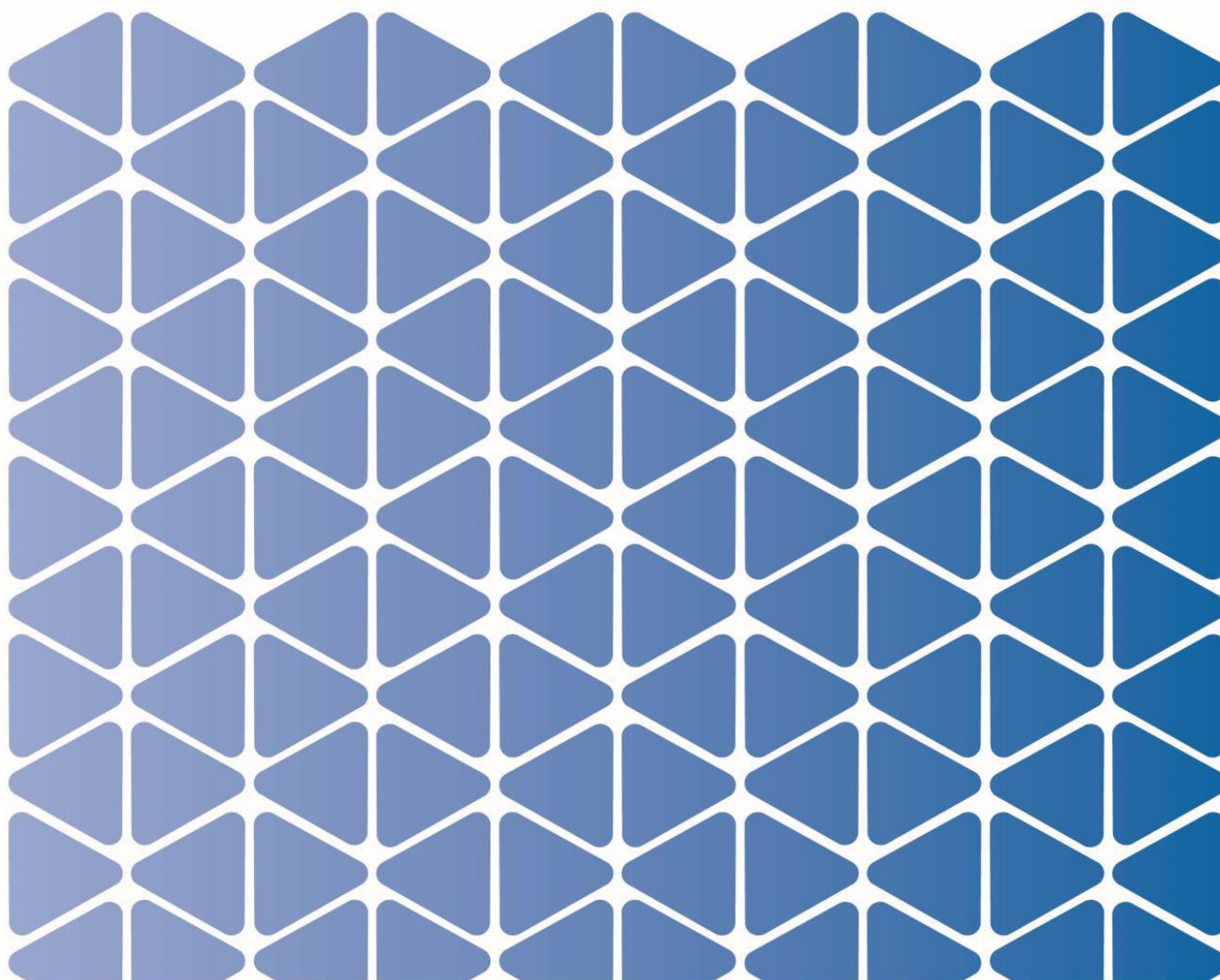




**Worcestershire
Acute Hospitals**
NHS Trust

PATIENT INFORMATION
GYNAECOLOGY ONE STOP CLINIC

TREATMENT OF BARTHOLIN'S CYST/ABSCESS



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We hope that this information leaflet will help you to understand your care options. We hope that you will feel comfortable to ask questions of your health professional so that you can work together to make a plan that meets your needs and priorities.

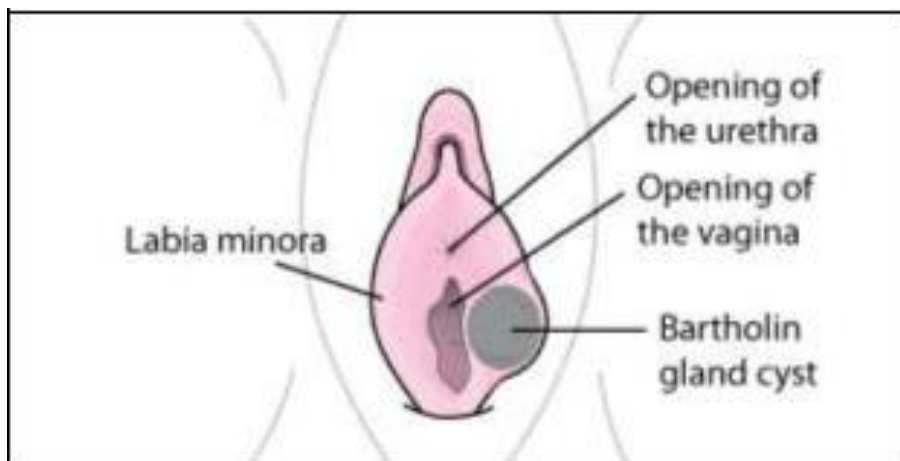
Remember you can always ask the healthcare professional to explain things differently, explain things again, or to write down information for you.



Bartholin's Abscess/Cyst

What is Bartholin's Abscess/Cyst?

The Bartholin's glands are a pair of pea-sized glands found just behind and either side of the lips that surround the entrance to the vagina. The Bartholin's glands secrete fluid that acts as a lubricant during sex. The fluid travels down tiny tubes called ducts into the vagina. Sometimes the tiny ducts (tubes) that carry the fluid from the glands can become blocked. This can cause a swelling, which you can feel but is not painful, called a **Bartholin's cyst** (a fluid-filled lump). It's often not known why the ducts become blocked but some cases are linked to sexually transmitted bacterial infections (STIs), such as



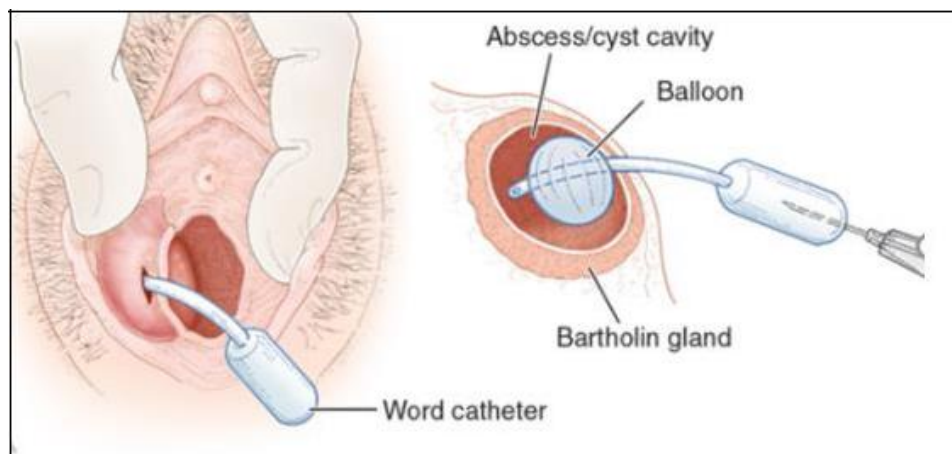
gonorrhoea or chlamydia, or other bacterial infections, such as Escherichia coli (E. coli). If the gland or cyst becomes infected, this is known as a Bartholin's abscess. Symptoms may include pain and swelling causing difficulty in walking and sitting down.

Bartholin's Cyst/Abscess Treatments

1. Balloon catheter insertion

This procedure can be carried out in the one stop clinic.

Balloon catheter insertion, sometimes known as catheter placement or fistulisation, is a procedure used to drain the fluid from the abscess or cyst. A permanent passage is created to drain away any fluid that builds up in the future. It's usually carried out under local anaesthetic, where you remain conscious, but the area is numbed so you cannot feel anything. It can also be carried out under general anaesthetic, where you're unconscious and unable to feel anything. A small opening is made in the abscess or cyst and the fluid is drained. A balloon catheter is then inserted into the empty abscess or cyst. A balloon catheter is a thin, plastic tube with a small, inflatable balloon on one end. Once inside the abscess or cyst, the balloon is filled with a small amount of salt water. This increases the size of the balloon so it fills the abscess or cyst. The catheter



will stay in place while new cells grow around it (epithelialisation). This means the surface of the wound heals, but a drainage passage is left in place. The new drainage passage usually takes around 2-4 weeks to form, although it can take longer.

What are the risks of the treatment?

A few small studies have reported more than 80% of women healed well and their cysts or abscesses didn't return after balloon catheter insertion. Possible complications of balloon catheter insertion include: pain while the catheter is in place; pain or discomfort during sex; swelling of the lips around the opening of the vagina (labia); infection; bleeding and recurrence – the risk is very low (4 in 100 people experience a recurrence).

What happens after the treatment?

- You can go home 30 minutes after the procedure. You may be in some discomfort after the procedure, but you should be safe and able to travel home independently. You may want to keep the rest of your day after your procedure free in case you are uncomfortable.
- You will need a follow up appointment 2-3 weeks after the treatment in the Gynaecology Assessment Unit to drain the balloon and remove the catheter.

2. Marsupialisation

This procedure is not carried out in the one stop clinic.

If a cyst or abscess keeps coming back, a surgical procedure known as marsupialisation may be used. The cyst is first opened with a cut and the fluid is drained out. The edges of the skin are then stitched to create a small opening for the gland to drain. When the procedure is complete, the treated area may be loosely packed with special gauze to soak up fluid from the wound and stop any bleeding. This will usually be removed before you go home.

Marsupialisation takes about 10 to 15 minutes and is usually performed as a day case procedure, so you won't have to stay in hospital overnight. It's usually carried out under general anaesthetic, although local anaesthetic can be used instead.

What are the risks of the treatment?

Although complications after marsupialisation are rare, they can include: infection; the abscess returning; bleeding and pain (you may be given painkillers for the first 24 hours after the procedure).

What happens after the treatment?

After marsupialisation, you'll be advised to take things easy for a few days. You should avoid having sex until the wound has completely healed, which usually takes about 2 weeks. You should take pain relief as recommended by the Doctor.

3. Removing the Bartholin's Gland

This procedure is not carried out in the one stop clinic.

Surgery to remove the affected Bartholin's gland may be recommended if other treatments haven't been effective and you have repeated Bartholin's cysts or abscesses. This operation is usually carried out under general anaesthetic and takes about an hour to complete.

What are the risks of the treatment?

Risks of this type of surgery include bleeding, bruising and infection of the wound. If the wound does become infected, this can usually be treated with antibiotics prescribed by your GP.

What happens after the treatment?

- You must not drive or perform tasks that need careful attention for 24 to 48 hours after having a general anaesthetic. Somebody will need to help you to get home.
- To help your wound heal and reduce the risk of infection after surgery, you may be advised to avoid: sexual intercourse; using tampons and using perfumed bath additives for up to four weeks.

Consent

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves. If you would like more information about our consent process, please speak to a member of staff caring for you.

Having read the above information, it might be helpful to think about the following...

- What do I want to ask my healthcare professional?
- What is worrying me about this procedure right now?
- What else is important in my life right now? Will this influence whether or not I have this procedure?
- Who is able to support me with the care that I chose?
- Would I like someone to come with me to my appointment if possible? *Please note that there may currently be restrictions on this as a result of the Covid-19 pandemic.*

Your notes

You can fill out the following table with your healthcare professional. This will help you to think about which option is best for you, given your individual situation. Doing nothing is also an option.

My Options include...	The Benefits Why is this option good for me?	The Risks What is not so good about this option for me?
To have treatment		
To do nothing		
Alternative treatment(s)		

You might also want to ask...

- How quickly should I expect to see an improvement?
- Do I need to take any medication after the procedure? E.g. pain relief.
- Are there any activities that I need to avoid after the procedure? E.g. am I able to resume sexual activity? Am I able to go swimming?
- Who should I contact if I have questions after I leave today?
- Do I need to come back to the hospital again? Or to see my GP after today?
- Where can I go to get more information?
- What lifestyle changes could I make to support my recovery?

Your notes

Remember you can always ask the Doctor to explain things differently, explain things again, or to write down information for you.

Who should I contact if I have any problems?

The Emergency Gynaecology Assessment Unit (EGAU) is open 24 hours a day, 7 days a week. If you have any concerns after your treatment you can ring EGAU on 01905 761489 to speak to one of the gynaecology nurses for advice. You can also speak to your GP.

You should contact EGAU or your GP if after the treatment you have any of the following symptoms:

- An offensive, smelly discharge
- Heavy bleeding from the vagina
- Severe abdominal pain
- High temperatures
- **If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999 via the main hospital switchboard for advice.**

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Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.